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FACSIMILE TRANSMITTAL SHEET

To:

EXAMINER SAMUEL G. GILBERT

FIRM/COMPANY:

Mail Stop Amendment

FACSIMILE NUMBER:

571 273-8300

CONFIRMATION TELEPHONE:

FROM:

Ruth Der, Paralegal

DIRECT DIAL:

415.957-3031

DATE:

September 28, 2006

USER NUMBER:

FILE NUMBER:

Atty. Docket No. R0368-03200, Serial No. 10/721,857

TOTAL # OF PAGES:

(INCLUDING COVERSHEET)

5

MESSAGE:

Attached is Supplemental Information Disclosure Statement and Form

PTO-1449.

Please confirm receipt of this facsimile.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re ti	ne application of	Examiner: Samuel G. Gilbert						
Burt	ank et al.) Group Art Unit: 3735						
For:	OCCLUSION DEVICE FOR ASYMMETRICAL UTERINE ARTERY ANATOMY) }						
Serial	No.: 10/721,857) TRANSMITTAL						
Filed:	November 25, 2003)						
Atty. C	Oocket No.: R0368-03200	<u>}</u>						
CERTIFICATE OF MAILING PURSUANT TO 37 C.F.R. §1.8 1 hereby certify that this correspondence is being transmitted by facsimile to (\$71) 273-8300, Moil Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 Attn: Examiner Samuel C. Gilberton 7, 28 3, 300 in San Francisco, CA. By:								
Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
Dear \$	Sir:							
1.	Fransmitted herewith for filing in the above-identified	smitted herewith for filing in the above-identified patent application are						
	X Supplemental Information Disclosure State	Supplemental Information Disclosure Statement;						
	X Form PTO-1449.							
2. I	Payment of Fees							
•	No fees are due with this communication. The Commissioner is authorized to charge any fees due and to credit any overpayment of fees which may be required under 37 C.F.R. §1.16 or §1.17, to Deposit Account No 04-1679, referencing Atv. Docket No. R0368-03200 . A duplicate copy of this transmittal is enclosed for this purpose.							
	Respectfully submitted,							
By: Shard J. Lyngh								
	Registration No. 24,422							
_		y for Applicants						
Duane Morris LLP								

One Market Spear Tower, 20th Floor San Francisco, CA 94105 Telephone: (415) 957-3000 Facsimile: (415) 957-3001 Direct Dial: (415) 957-3067

San Francisco, CA 94105 Telephone: (415) 957-3000 Facsimile: (415) 957-3001 Direct Dlal: (415) 957-3067

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SEP 2 8 2006

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of Burbank et al.		Examiner: Samuel G. Gilbert Group Art Unit: 3735					
Гог :	OCCLUSION DEVICE FOR ASYMMETRICAL UTERINE ARTERY ANATOMY))					
Şerial	No.: 10/721,857)) <u>transmittal</u>					
Filed:	November 25, 2003	}					
Atty. E	Docket No.: R0368-03200	Ś					
1 hereby P.O.	CERTIFICATE OF MAILING PURSUAN certify that this correspondence is being transmitted by facsimile to (571)? Box 1450, Alexandria, VA 22313-1450 Attn: Examiner Samuel C. Gilbert By:	TT TO 37 C.F.R. §1.8 73-8300, Mail Stop Amendment, Commissioner for Patents, on 9/2 7/2000, in San Francisco, CA.					
Comn P.O. E	Stop Amendment nissioner for Patents Box 1450 ndria, VA 22313-1450						
Dear	Sir:						
1.	Transmitted herewith for filing in the above-identif	led patent application are					
	X Supplemental Information Disclosure Sta	atement;					
	<u>X</u> <u>Form PTO-1449</u> .						
2.	Payment of Fees						
	No fees are due with this communication. The Commissioner is authorized to charge any fees due and to credit any overpayment of fees which may be required under 37 C.F.R. §1.16 or §1.17, to Deposit Account No 04-1679, referencing Atty. Docket No. R0368-03200. A duplicate copy of this transmittal is enclosed for this purpose.						
	Respectfu	lly submitted,					
	Ву: \iint	Vand Dugel					
	Edw	ard J. Lynch istration No. 24,422					
	Atto	mey for Applicants					
	ne Morris LLP						
	Market ar Tower, 20th Floor						

SEP 2 8 2006

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of

Burbank et al.

For: OCCLUSION DEVICE FOR

ASYMMETRICAL UTERINE ARTERY

ANATOMY

Serial No.: 10/721,857

Filed: November 25, 2003

Docket No.: R0368-03200

Examiner: Samuel G. Gilbert

Group Art Unit: 3735

SUPPLEMENTAL INFORMATION
DISCLOSURE STATEMENT

CERTIFICATE OF MAILING PURSUANT TO 37 C.F.R. §1.8

1 hereby certify that this correspondence is being transmitted by facsimile to (571) 273-8300, Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 Attn: Examiner Samuel G. Gilbert on 7/28 / 1000 in San Francisco, CA.

By:

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Applicants wish to bring to the attention of the Patent Office the references listed on the attached PTO-1449 form and request that they be considered by the Examiner. Each item of information contained in the attached was cited from the Patent Office on a related application not more than three months prior to the filing of this statement.

This information disclosure statement is being filed under 37 C.F.R. §1.97(b)(3), therefore, no fee is due. The Commissioner is authorized to charge any fees due and to credit any overpayment which may be required under 37 C.F.R. §1.16 and §1.17 to Deposit Account No. 04-1679, referencing Atty. Docket No. R0368-03200.

Respectfully submitted,

Edward J. Lynch

Registration No. 24,422 Attorney for Applicants

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE			ATTORNEY DOCKET NO.:	SERIAL NO.:					
					R0368-03200	10/721,857			
INFORMATION DISCLOSURE STATEMENT									
	UNDER 3	7 CFR §1.56, §1.97,	and §1.98		APPLICANTS:	EXAMINER			
		PTO-1449 FORM			Burbank et al.		Samuel G. Gilbert		
		AUGET 4 AE 4			FILING DATE:	GROUP ART UN			
	SHEET 1 OF 1			November 25, 2003	ı	3735			
U.S. PATENT DOCUMENTS									
†EX'R INITIAL	*REF.#	PATENT NUMBER	DATE (MO/YR)		NAME	U.S. CLASS/ SUBCLASS	FILING DATE (If appropriate)		
	A97	5,562,680	10/96		Hasson				
~	A98	5,582,617	12/96		Klieman et al.				
	A99	5,697,937	12/97		Toma				
	A100	6,371,973	4/02		Tepper				
	A101	6,905,506	6/05		Burbank et al.				
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	<u> </u>		FOREIGN PA	TENT D	OCUMENTS				
† EXR	*REF. #	PATENT NUMBER	DATE (MO/YR)		COUNTRY	TRANSLATION (YES/NO)			
INITIAL	115177		,			(123110)			
		<u></u>	NON-PATE	NT DO	CUMENTS				
† EXTR	*****	<u> </u>				Panes Fig.)			
INITIAL	*REF. #	Document Description (including Author, Title, Date, Pertinent Pages, Etc.)							
						<u>,</u>			
									
EXAMINER'S SIGNATURE DA'				DAT	E CONSIDERED				
† EXAMINER: Initial if reference is considered, whether or not citation is in conformance with MPEP 609. Line through citation if not in conformance and not considered. Include copy of this form in next communication to applicant.									
If an asterisk is placed beside the reference number, a copy is not provided because the reference was previously cited by or submitted to the PTO									